U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



1. File Number U - 34/9

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

	1 / 2004 Through: 12 / 31 / 2004	
3. Name and address of person filing.	4. Name, file number, and address of labor organization.	
Name FISEL ROMER D	Name CHICAGO REGIONAL CONNELL OF CARPENTERS	
	Labor Organization File Number 001-947	
P.O. Box, Bidg., Room No., if any P.D. Box 32238	P.O. Box, Building and Room Number, if any	
Street	Street /& E. FRIE STREET.	
City CHICAGO	City CHICAGO	
State	State 1/21/NOIS ZIP Code + 4 606/1	
5. Position in labor organization.		
<u> </u>		
Enter appropriate data below If, during the past fiscal year, you or your spo (except as specified in the exclu	use or minor child directly or indirectly had any of the following interests usions set forth in the instructions):	
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organizati	derived income or other economic benefit of ion represents or is actively seeking to represent.	
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.	
Name		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
k keep man and a second a second and a second a second and a second a second and a second and a second and a	7.b. Amount.	
Street		
City		
State ZIP Code + 4		
Signature		
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed Sidel Lamen	on 7/2/01 (3/2) 219-2753	
Signed Start Current	Date Telephone Number	
Form LM-30 (2003)	D	

Name of Person Filing FISEL ROMERO		File Number U- 34/9	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.			
8. Name and address of Business (including trade name, if any).  Name CARPENTERS LOCAL No. 10  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street 7625 W. 10045 PL  City BRINGEVIEW  State 1441N61S ZIP Code + 4 60455	9. Business deals with:  a. Labor Organiza  b. Trust  c. Employer	tion	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such deali	ing.	
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any	(2) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4		
Street			
City	11.b. Approximate dollar valu	Strain Communication of the Co	
State ZIP Code + 4	12.a. Nature of interest, hel	to or income received.	
	12.b, Amount.		
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.			
<ol> <li>Name and address of Employer or Labor Relations Consultant (including trade name, if any).</li> </ol>	14.a. Nature of payment.		
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street			
City			
State ZIP Code + 4	Bankhing gagg sphrimaen sich auf all die pagegaphage fals and 600 beer of the		
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.	g. Ch. data. Pyrococcupy consistent and the second control of the	

## DISCLAIMER

The transactions, dealings and interests that are detailed in the attached LM-30 Report represent my good faith effort to reconstruct the reportable occurrences for the period of January 1, 2004 to December 31, 2004. Accurate records of reportable occurrences were not kept for the 2004 fiscal year, and some or many items may have been unintentionally omitted. If, in the future, it comes to my attention that there exists a transaction, dealing or interest that should have been reported for the period of January 1, 2004 to December 31, 2004, I will immediately file an amended LM-30 Report.

Signature

Date